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PATENT APPLICATION Attorney's Docket No.: 2345.2003-001 Expedited Procedure under 37 C.F.R. § 1.116 **Examining Group 2135**



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:

Hakon Gudbjartsson, Sverrir Karlsson and Skeggi Thormar

Application No.:

09/808,720

Group:

2135

Filed:

March 15, 2001

Examiner: Paula W. Klimach

Confirmation No.:

5511

For:

Automatic Identity Protection System with Remote Third Party Monitoring

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:

Signature

Typed or printed name of person signing certificate

AMENDMENT AFTER FINAL REJECTION UNDER 37 C.F.R. § 1.116

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

This Amendment After Final Rejection is being filed in response to the Final Office Action mailed from the U.S. Patent and Trademark Office on April 5, 2005 in the aboveidentified application. Reconsideration and further examination are requested.

Please amend the application as follows:



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Hakon Gudbjartsson, Sverrir Karlsson and Skeggi Thormar

Application No.:

09/808,720

Group: 2135

Filed:

March 15, 2001

Examiner: Paula W. Klimach

Confirmation No.: 5511

For:

AUTOMATIC IDENTITY PROTECTION SYSTEM WITH REMOTE

THIRD PARTY MONITORING

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:

June 6, 2005

Date

Signature

MARIANNE LENTINI

Typed or printed name of person signing certificate

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Final for filing in the above-identified application.

[]	Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been
	established by a Small Entity Statement previously submitted.

[]	A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and
	1.27 is enclosed

The claims fee has been calculated as shown below:

					_	SMAL	L ENTITY	_		L ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDIT. FEE	<u>OR</u>	RATE	ADDIT. FEE
TOTAL	36	MINUS	* 39			X \$ 25	\$		X \$50	\$
INDEP	2	MINUS	** 3			X \$100	\$		X \$200	\$
	FIRST PRESENT.	ATION O	F MULTIPLE DE	EP. CLAIM		+ \$180	\$		+ \$360	\$
				wer than 20		TOTAL=	\$ 0		ΤΟΤΔΙ=	\$ 0

not fewer than 3

	_	_
TOTAL≔	\$. 0

OTHER THAN

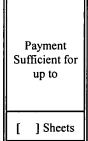
The Application Size Fee has been calculated as shown below: (Effective for cases filed on or after December 8, 2004)

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Rate	Total Amount Owed
X \$125	\$ []

OTHER THAN **SMALL ENTITY**

Rate	Total Amount Owed
X \$250	\$ []



Petition for Extension of Time

[]	Applicant hereby	petition	s to extend	l the time to re	espond to the [] dated [] for [j
		month(s) from [] to []. The ap	ppropriate fee	is set forth belo	w.		

[] [For action-specific language in an extension of time, go to insert, file, public folders, firm templates, and select the appropriate paragraph.]

r 1	Petition for [] month Extension of Time		\$	
[]	Claims Fee	,		\$	
[]	Application Size	Fee		\$	
[]	Other Fees:				
				_ \$	
				_ \$	
check	is enclosed in payn	nent of the following fees:	TOTAL:	\$	0
check		nent of the following fees:] month Extension of Time	TOTAL:	\$ \$	0_
check		_	TOTAL:	\$ \$ \$. 0_
check [] [] []	Petition for [Claims Fee Application Size] month Extension of Time	TOTAL:	\$ \$ \$ \$. 0_
check [] [] []	Petition for [Claims Fee] month Extension of Time	TOTAL:	\$ \$ \$ \$	
check [] [] []	Petition for [Claims Fee Application Size] month Extension of Time	TOTAL:	\$ \$ \$ \$ \$	0

[X] Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this letter is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Keith J. Wood

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Concord, Massachusetts 01742-9133

Dated: (/6/05